

Amendments to the Claims

The following listing reflects amendments to the claims and replaces all prior versions and listings of claims in this application.

1. **(Currently Amended)** A method for delivering a pharmacologically active agent ~~to the upper gastrointestinal tract of a patient over an extended time period while minimizing delivery to the lower gastrointestinal tract and colon,~~ the method comprising:

orally administering to a patient ~~in whom in a the fed mode has been induced a sustained an extended-release~~ oral dosage form consisting of a single matrix comprising ~~comprised of~~ a therapeutically effective amount of the pharmacologically active agent ~~incorporated in a matrix of and~~ at least one biocompatible, hydrophilic polymer ~~that;~~, wherein the dosage form

(a) upon imbibition of water swells unrestrained dimensionally to a size effective ~~in the presence of water in gastric fluid such that the size of the dosage form is sufficiently increased to provide gastric retention of the dosage form in the stomach of a patient in whom the fed mode to promote gastric retention, has been induced;~~ and

(b) is characterized by an erosion rate (ER) to dissolution rate (DR) ratio of approximately 1.1:1 to 5:1, wherein ER is the time period, wherein the ratio of the erosion rate ER obtained in vitro rate of active agent release in an aqueous medium measured using an in vitro for the dosage form using USP disintegration test, and DR is the rate of active agent release equipment to the dissolution rate DR obtained in vitro for the dosage form in an aqueous medium measured using an in vitro USP dissolution test equipment is in the range of approximately 1.2:1 to approximately 5:1.

2. **(Currently Amended)** The method of claim 1, wherein following said administering oral administration, the dosage form is retained in the upper gastrointestinal tract for a time period of about 2 to 12 hours.

3. **(Currently Amended)** The method of claim 2, wherein following said administering oral administration to a patient in the fed mode, the dosage form is retained in the upper gastrointestinal tract for a time period of about 4 to 9 hours.

4. **(Currently Amended)** The method of claim 2, wherein at least 75 wt. % of the active agent in the dosage form is released within the time period.
5. **(Currently Amended)** The method of claim 4, wherein at least 85 wt. % of the active agent in the dosage form is released within the time period.
6. **(Currently Amended)** The method of claim 3, wherein at least 75 wt. % of the active agent in the dosage form is released within the time period.
7. **(Currently Amended)** The method of claim 6, wherein at least 85 wt. % of the active agent in the dosage form is released within the time period.
8. **(Currently Amended)** The method of claim 2, wherein the therapeutically effective amount of the active agent in the dosage form is in ~~the~~ a range of about 0.01% to 80% by volume.
9. **(Currently Amended)** The method of claim 8, wherein the therapeutically effective amount of the active agent in the dosage form is in ~~the~~ a range of about 60% to about 80% of the dosage form by volume.
10. **(Currently Amended)** The method of claim 9, wherein the therapeutically effective amount of the active agent in the dosage form is ~~represents approximately 60% to 80% of the dosage form~~ by volume.
11. **(Original)** The method of claim 2, wherein the active agent is an antibiotic.
12. **(Original)** The method of claim 11, wherein the active agent is selected from the group consisting of ciprofloxacin, minocycline, and acid addition salts thereof.
13. **(Original)** The method of claim 12, wherein the active agent is ciprofloxacin.
14. **(Original)** The method of claim 12, wherein the active agent is ciprofloxacin hydrochloride.
15. **(Original)** The method of claim 12, wherein the active agent is minocycline.

16. **(Original)** The method of claim 12, wherein the active agent is minocycline hydrochloride.
17. **(Original)** The method of claim 2, wherein the active agent is selected from the group consisting of furosemide, gabapentin, losartan, and budesonide.
18. **(Currently Amended)** A method for treating a human patient suffering from a bacterial infection that is responsive to the oral administration of ciprofloxacin, comprising orally administering to the subject in a fed mode a therapeutically effective amount of the dosage form of claim 1 to the patient for a therapeutically effective time period.
19. **(Original)** The method of claim 18, wherein the dosage form is administered once daily.
20. **(Original)** The method of claim 18, wherein the bacterial infection is infection with mycobacterium avium complex, Pseudomonas, Shigella, Salmonella, toxigenic *E. coli*, Campylobacter, Enterobacter, or *Bacillus anthracis*.
21. **(Cancelled).**
22. **(Currently Amended)** The method of claim 1, 24, wherein ~~(d) comprises selecting a~~ the dosage form having a is characterized by an ratio of ER to DR ratio is in the range of approximately 1.2:1 to approximately 3:1.
23. **(Currently Amended)** The method of claim 22, wherein ~~(d) comprises selecting a~~ the dosage form is characterized by an having a ratio of ER to DR ratio is in the range of approximately 1.3:1 to approximately 2:1.
24. **(Currently Amended)** The method of claim 23, wherein ~~(d) comprises selecting a~~ the dosage form is characterized by an having a ratio of ER to DR ratio is in the range of approximately 1.5:1 to approximately 2:1.

25. **(New)**. The method of claim 1, wherein said active agent possesses an aqueous solubility that decreases with increasing pH.

26. **(New)** The method of claim 25, wherein following administering of said dosage form and gastric retention thereof, the dosage form passes into the lower gastrointestinal tract, whereby active agent remaining in the dosage form is insoluble and unavailable for absorption.